

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

*Only for new nonprovisional applications under
37 C.F.R. § 1.33(b)*

Attorney Docket No.	A-9141	
First Inventor or Application No.		SCHOENBLUM
Title	A DIGITAL STREAM TRANSCODER WITH A HYBRID-RATE CONTROLLER	
Express Mail Label No.	EL970104537US	

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

1. Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original and duplicate for fee processing)
2. Specification [Total Pages 53]
3. Drawings (35 U.S.C. § 113) [Total Sheets 13]
4. Oath or Declaration
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 C.F.R. § 1.63(d))
(For continuation/divisional with Box 16 completed)
 - i. **DELETION OF INVENTORS**
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b)

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the information below and in a preliminary amendment:

Continuation Divisional Continuation-in-part (CIP) of prior application No: 10/635,406 (A-9049)

Prior application information: Examiner: UNKNOWN Group Art Unit: UNKNOWN

17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code

05642

or Correspondence address below

Name			
Address			
City			
Country	Telephone	State	Zip Code
			Fax

Name (Print/type)	SHELLEY L. COUTURIER		Registration No. (Attorney/Agent)	47,503
Signature	<i>Shelley L. Couturier</i>		Date	SEPTEMBER 9, 2003

Docket No.: A-9141

22387 115 5 PTC
10/658131
09/09/03

UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: SCHOENBLUM
DOCKET NO.: A-9141
TITLE: A DIGITAL STREAM TRANSCODER WITH A HYBRID-RATE
CONTROLLER

SEPTEMBER 9, 2003

FEE TRANSMITTAL FORM

Mail Stop PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

The Commissioner is hereby authorized to charge the indicated fees and any additional fees and to credit any overpayments to Deposit Account No. 19-0761

The fee is calculated as shown below.

	No. of Claims Filed	No. of Claims Paid For	No. of Extra Claims	Rate	Fee
Independent Claims	2	3	0	\$ 84.00	\$000.00
Total Claims	51	20	31	\$ 18.00	\$558.00
Multiple Dependent Claims				\$280.00	\$000.00
Basic Filing Fee				\$750.00	\$750.00
Total Filing Fee					\$1,308.00

One duplicate original of this sheet is enclosed.

SEND CORRESPONDENCE TO:

Scientific-Atlanta, Inc.
Intellectual Property Dept. MS 4.3.510
5030 Sugarloaf Parkway
Lawrenceville GA 30044

By:


SHELLEY L. COUTURIER
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Certificate of Mailing

EXPRESS MAIL NO.: EL970104537US

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as EXPRESS MAIL in an envelope addressed to:

MAIL STOP PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on SEPTEMBER 9, 2003.


Maryellen Licker